

Integrated Health Home Workgroup Meeting July 6, 2022

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Role Call

Format of Workgroup

- Discuss prior meeting (high level)
- Topic for the meeting
- Plan and expectations for next meeting

It is ok to ask questions during the meeting and between meetings. These questions and answers will be shared at the beginning of each meeting.

What is Our Why? What Do We Want to Accomplish?

- Identify how the Health Homes meet the provider standards set forth by the federal government as well as identify appropriate oversight of those standards.
- Develop a proposal for a payment methodology that is consistent with the goals of efficiency, economy, and quality of care. The rate will be developed according to the actual cost of providing each component of the service.
- Review member qualifications in order to propose qualifications that meets federal and state code.
- Update Health Home Services to reflect whole-person team based-care while reducing provider burden.
- Develop a Quality Improvement model that can be adopted by Integrated Health Homes.
- Develop a proposal to present to the State that encompasses all the forementioned goals.

Ground Rules

- You can respect another person's point of view without agreeing with them.
- Respectfully challenge the idea, not the person and bring potential solutions.
- Blame or judgment will get you further from a solution, not closer.
- Honest and constructive discussions are necessary to get the best results.
- Listen respectfully, without interrupting.
- Listen actively and with an ear to understanding others' views. (Don't just think about what you are going to say while someone else is talking.)
- Commit to learning, not debating. Comment in order to share information, not to persuade.
- Avoid blame, speculation, and inflammatory language.
- Allow everyone the chance to speak.

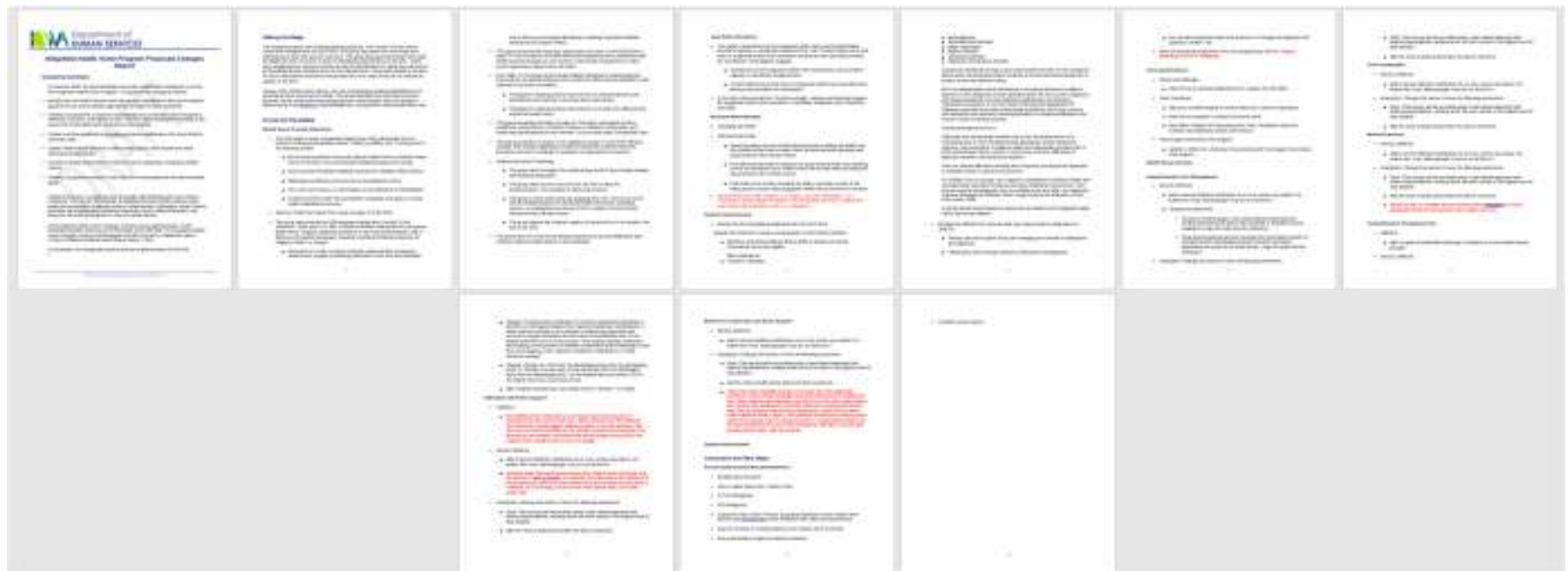
Objectives

- Review of Last Meeting and Workgroup Report
- Health Home Services
 - Include discussion of who can do what and examples of documentation.
 - Include HIT requirements for specific services.
 - Function and roles
 - Hab/CMH vs Health Home Requirements need clarified
- Quality Improvement Overview

Last Meeting

- Discussed Health Home Services


Workgroup Report



Follow-up

- 99490
 - MCO Recommendations S0280 with modifiers that are different than the CCHH.
- Health Promotion in Workgroup Report
 - Would we want to consider for one of the activities education on use of appropriate levels of care (primary care, urgent care, ED)

Overview of the Timeline

 Health Home Quality Improvement Workgroup	
<p>The Health Home Quality Improvement Workgroup was created and the development of ongoing review and activities. This workgroup will meet at weekly from 10am to 11am. Presentations will be submitted to the HHS for review. The plan is to update the SPA based on approved recommendations/changes.</p>	
Date	Topic/Item
February 1, 2022	Initial meeting <ul style="list-style-type: none"> Federal Requirements OSU (that supports) in context
February 16, 2022	Iowa Health Home <ul style="list-style-type: none"> Submitted Health Home SPA What are the existing ones? What changes from state and city? (Health Home) or already
March 3, 2022	Health SPA from 2016 (or supporting documentation) <ul style="list-style-type: none"> What are the existing ones? What changes from state and city? (Health Home) or already Flow chart of what is the authority (Federal code, Iowa code, SPA...) Include SPA from 2016 as supporting documentation
March 14, 2022	Iowa Administrative Rule (draft) Review of last meeting's feedback Review of the site feedback, survey, and Listening Sessions. Health Home Providers
March 24 th , 2022	Review of last meeting's feedback Health Home Providers Provider Standards <ul style="list-style-type: none"> How does the Health Home Meet? Peer Support and Family Peer Support (HHS responsibility to coordinate services when they qualify for Habilitation/CFW, but services are not available. Managing Habilitation and CMTW How does the MCO/Iowa Medicaid support and oversee? Address feedback of MCO/IME Administrative Oversight, Review.
April 14, 2022	<ul style="list-style-type: none"> Using the review information to support the work Review of last meeting's feedback Provider Standards <ul style="list-style-type: none"> Peer Support and Family Peer Support (HHS responsibility to coordinate services when they qualify for Habilitation/CFW, but services are not available. Managing Habilitation and CMTW How does the MCO/Iowa Medicaid support and oversee? Address feedback of MCO/IME Administrative Oversight, Review. Using the review information to support the work
April 27 th , 2022	Review of last meeting's feedback Provider Standards <ul style="list-style-type: none"> CFW CFW Distribution Habilitation <ul style="list-style-type: none"> Health Home Services documentation on the state
May 11, 2022	Habilitation <ul style="list-style-type: none"> Health Home Services documentation on the state Member Qualifications <ul style="list-style-type: none"> MCO/IME Support of Provider Enrollment Activities How does CMH and Habilitation fit into this?
May 25, 2022	Review of last meeting's feedback Member Qualifications <ul style="list-style-type: none"> Address the LMHP requirement for PT (propose recommendations) <ul style="list-style-type: none"> Multiple ask for records, incomplete records, refusing to share records Causes an access to Health Home Services barrier Health Home doesn't want to turn away eligible members Causing provider attrition between LMHP and HHS Causes bottleneck Team Qualifications <ul style="list-style-type: none"> Name: looking at recent Rule, what is allowed? Peer Training: (age requirement, additional training, support needs of the HHS) Care Coordinator: Other Rule, ETP allowance.
June 8, 2022	Review of last meeting's feedback Health Home Services include discussion of who can do what. Also,
June 15, 2022	Review of last meeting's feedback Quality Improvement <ul style="list-style-type: none"> Learning Collaborative process Standard HHS Internal Quality Improvement
June 22, 2022	Review of last meeting's feedback Quality Improvement <ul style="list-style-type: none"> Learning Collaborative process Standard HHS Internal Quality Improvement
July 6, 2022	Review of last meeting's feedback Quality Improvement <ul style="list-style-type: none"> Learning Collaborative process Standard HHS Internal Quality Improvement
July 20, 2022	Putting it all together. Presentation of Draft Proposal and SPA

Documents for Today



Table of Contents

State/Territory Name: IA

State Plan Amendment (SPA) #: 16-0013

This file contains the following documents in

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

Consolidated Implementation Guide: Medicaid State Plan – Health Homes

Health Home/Policy	1
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Types of Health Home Providers	2
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Support for Health Home Providers	2

Health Home Services

- Individual and Family Support (which includes authorized representatives)
- Referral to Community and Social Support Services

Brainstorming Document

Health Homes Monitoring, Quality Measurement and Evaluation

Reference Documents

Federal Guidance Document Page 39

<https://downloads.cms.gov/cmsgov/archived-downloads/smdl/downloads/smd10024.pdf> Page 11

Monitoring

Describe the state's methodology for calculating cost saving. The description should include:

- Savings resulting from improved coordination of care and chronic disease management, including data sources and measurement specifications;
- Savings associated with serving dual-eligibles, including if Medicare data was available to the state and used in calculating the estimate.

Quality Measurement and Evaluation Check

Check the four assurances related to:

- Requiring providers to report to the state all applicable quality measures as a condition of receiving payment;
- Identifying measurable goals and quality measures for each goal;
- Reporting information to CMS;
- Tracking avoidable hospital readmissions and reporting annually in the Quality Measures report.

Quality Measure Reports (2022)

NQF #	Measure Steward	Measure Name	Data Collection Method
Core Set Measures			
0004	NCQA	Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-HH)	Administrative or EHR
0018	NCQA	Controlling High Blood Pressure (CBP-HH)	Administrative, hybrid, or EHR
0034	NCQA	Colorectal Cancer Screening (COL-HH)*	Administrative or EHR*
0418**/ 0418e**	CMS	Screening for Depression and Follow-Up Plan (CDF-HH)	Administrative or EHR
0576	NCQA	Follow-Up After Hospitalization for Mental Illness (FUH-HH)	Administrative
1766**	NCQA	Plan All-Cause Readmissions (PCR-HH)	Administrative
3400	CMS	Use of Pharmacotherapy for Opioid Use Disorder (OUD-HH)	Administrative
3488	NCQA	Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA-HH)	Administrative
3489	NCQA	Follow-Up After Emergency Department Visit for Mental Illness (FUM-HH)*	Administrative
NA	AHRQ	Prevention Quality Indicator (PQI) 92: Chronic Conditions Composite (PQI92-HH)	Administrative
Utilization Measures			
NA	CMS	Admission to an Institution from the Community (AIF-HH)	Administrative
NA	NCQA	Ambulatory Care: Emergency Department (ED) Visits (AMB-HH)	Administrative
NA	CMS	Inpatient Utilization (IU-HH)	Administrative

<https://www.medicaid.gov/resources-for-states/medicaid-state-technical-assistance/health-home-information-resource-center/health-home-quality-reporting/index.html>

Next Steps

Discuss Health Homes Monitoring,
Quality Measurement and Evaluation